

Fill in this information to identify the case:

Debtor 1 JC USA, Inc.Debtor 2 _____
(Spouse, if filing)United States Bankruptcy Court for the: District of DelawareCase Number 23-10585

FILED

2023 JUL 31 AM 11:24

CLERK
US BANKRUPTCY COURT
DISTRICT OF DELAWARE**Request for Payment of Administrative Expense**

THIS FORM SHOULD ONLY BE USED FOR CLAIMS THAT ARE ENTITLED TO PRIORITY IN ACCORDANCE WITH 11 U.S.C. § 503(b)(1) through § 503(b)(8), and should not be used to assert a claim entitled to priority under 11 U.S.C. § 503(b)(9).

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Part 1: Identify the Administrative Expense

1. Who is the current claimant?	<u>San Diego County Treasurer-Tax Collector</u> Name of the current claimant (the person or entity to be paid for this claim)	
	Other names the claimant used with the debtor _____	
2. Has this administrative expense claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the claimant be sent?	Where should notices to the claimant be sent? <u>San Diego County Treasurer-Tax Collector</u> Name <u>1600 Pacific Highway, Rm 162 Attn: BK Desk</u> Number Street <u>San Diego, CA 92101</u> City State ZIP Code Contact phone <u>619.531.5639</u> Contact email <u>Edward.king@sdcounty.ca.gov</u>	Where should payments to the claimant be sent? (if different) Name _____ Number Street _____ City State ZIP Code _____ Contact phone _____ Contact email _____
4. Does this request for payment amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on ____ / ____ / ____	
5. Do you know if anyone else has filed a request for payment for this expense?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

Part 2: Give Information About the Administrative Expense

6. Do you have any number you use to identify the debtor? ☐ No ☒ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 4170

7. How much is the administrative expense? \$ 27,726.65 ** Fees attach pursuant to California Revenue and Taxation Code Sections 2704, 2705, 2706, 4103, 4103(b) or 2922.
CREDITS AND SETOFFS: The amount of all payments on this claim has been credited and deducted for the purpose of making this request for payment. In filing this request for payment, claimant has deducted all amounts that claimant owes to debtor.

8. What is the basis of the administrative expense? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).
Limit disclosing information that is entitled to privacy, such as health care information.

Property Taxes

Part 3: Sign Below

The person completing this request for payment of this administrative expense must sign and date it. FRBP 9011(b).

If you file this request for payment electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- ☐ I am the claimant.
☒ I am the claimant's attorney or authorized agent.
☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Request for Payment of Administrative Expense serves as an acknowledgment that when calculating the amount of the claim, the claimant gave the debtor credit for any payments received toward the debt.

I have examined the information in this Request for Payment of Administrative Expense and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 07/24/2023 (mm/dd/yyyy)

/S/ Edward King

Signature

Print the name of the person who is completing and signing this request for payment:

Name Edward King
First name Middle name Last name

Title Senior Specialist

Company San Diego County Treasurer-Tax Collector
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 1600 Pacific Highway, Rm 162 Attn: BK Desk
Number Street

San Diego, CA 92101
City State ZIP Code

Contact phone 619.531.5639 Email Edward.king@sdcounty.ca.gov

Description of Property: 1-PERSONAL PROPERTY/FIXTURES
Property Location: 5760 FLEET ST 000200

ANY QUESTIONS ABOUT THE ASSESSED VALUES OR TO WHOM THIS TAX BILL SHOULD BE ASSESSED SHOULD BE ADDRESSED TO:

COUNTY ASSESSOR
ROOM 103,
1600 PACIFIC HWY.
SAN DIEGO, CA 92101

TELEPHONE NUMBERS:

ASSESSMENTS:
Boats and Aircraft
Business
Realty

EXEMPTIONS:
Homeowner
Institutional

CREDIT CARD PAYMENTS:
Pay by phone: (855) 829-3773
Pay online: www.sdttc.com

QUESTIONS ABOUT TAX PAYMENTS,
AND REFUNDS, PENALTIES OR
COLLECTION PROCEDURES SHOULD
BE DIRECTED TO THE TREASURER-
TAX COLLECTOR
TOLL FREE: (877) 829-4732
Hearing Impaired: (877) 735-2929
www.sdtfc.com

Mail **STUB** with your **PAYMENT**. Put **Tax Bill Number** on your **CHECK**.
Your **Cancelled Check** is your best **RECEIPT** and Proof of Payment.

NOTICE: This Tax Bill is Payable on Demand

UNSECURED PROPERTY TAXES Send this STUB with your PAYMENT

Make remittance Payable To: San Diego County Treasurer-Tax Collector

BALANCE DUE: \$457.42

JC USA INC
DBA JENNY CRAIG
WEIGHT LOSS CENTER #30
5770 FLEET ST #200
CARLSBAD CA 92008

DETAIL OF TAX INFORMATION		
Rates and Descriptions	Tax Amounts	
RATE 1.08274 NET TAX TOT DUE	457.42 457.42	
TOTAL DUE TOTAL PAID BALANCE DUE	457.42 .00 457.42	

Year - Bill Number	23 025878
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PROPERTY VALUES AND EXEMPTIONS	
Description	Assessed Values
LAND	
IMPROVEMENTS	541
TOTAL L & I	541
PERSONAL PROPERTY	
EXEMPTIONS	41,706
HOMEOWNERS'	
OTHER	
NET TAXABLE VALUE	42,247

Year	Bill Number	Tax Rate Area
23	025878	009000

Account Number	743-0092979
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STATUS: OPEN

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NOTICE: This Tax Bill is Payable on Demand
UNSECURED PROPERTY TAXES Send this STUB with your PAYMENT
Make Check Payable To: San Diego County Treasurer Tax Collector

Year - Bill Number
23 015242

BALANCE DUE: 317.43

JC USA INC
DBA JENNY CRAIG
WEIGHT LOSS CENTER #11
5770 FLEET ST
CARLSBAD CA 92008

05000003174323015242005000031743230152420018

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NOTICE: This Tax Bill is Payable on Demand
UNSECURED PROPERTY TAXES Send this STUB with your PAYMENT
Make Check Payable To: San Diego County Treasurer Tax Collector

Year - Bill Number
23 015543

BALANCE DUE: 545.22

JC USA INC
DBA JENNY CRAIG
WEIGHT LOSS CENTER #11
5770 FLEET ST
CARLSBAD CA 92008

05000005452223015543005000054522230155430074

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NOTICE: This Tax Bill is Payable on Demand
UNSECURED PROPERTY TAXES Send this STUB with your PAYMENT
Make Check Payable To: San Diego County Treasurer Tax Collector

Year - Bill Number
23 015682

BALANCE DUE: 24,630.71

JC USA INC
DBA JENNY CRAIG
WEIGHT LOSS CENTER #10
5770 FLEET ST
CARLSBAD CA 92008

0500246307123015682005002463071230156820075

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NOTICE: This Tax Bill is Payable on Demand
UNSECURED PROPERTY TAXES Send this STUB with your PAYMENT
Make Check Payable To: San Diego County Treasurer Tax Collector

Year - Bill Number
23 015519

BALANCE DUE: 413.08

JC USA INC
DBA JENNY CRAIG
WEIGHT LOSS CENTER #11
5770 FLEET ST
CARLSBAD CA 92008

05000004130823015519005000041308230155190074

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NOTICE: This Tax Bill is Payable on Demand
UNSECURED PROPERTY TAXES Send this STUB with your PAYMENT
Make Check Payable To: San Diego County Treasurer Tax Collector

Year - Bill Number
23 015560

BALANCE DUE: 552.90

JC USA INC
DBA JENNY CRAIG
WEIGHT LOSS CENTER #11
5770 FLEET ST
CARLSBAD CA 92008

05000005529023015560005000055290230155600082

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NOTICE: This Tax Bill is Payable on Demand
UNSECURED PROPERTY TAXES Send this STUB with your PAYMENT
Make Check Payable To: San Diego County Treasurer Tax Collector

Year - Bill Number
23 025465

BALANCE DUE: 303.85

JC USA INC
DBA JENNY CRAIG
WEIGHT LOSS CENTER #11
5770 FLEET ST
CARLSBAD CA 92008

05000003038523025465005000030385230254650017

PROOF OF SERVICE BY MAIL

I am a United States citizen and employed in the County of San Diego. I am over eighteen years old and not a party to the action; my business address is 1600 Pacific Highway, Room 162, San Diego, CA 92101.

On July 24, 2023, I served the within REQUEST FOR SPECIAL NOTICE BY SECURED CREDITOR SAN DIEGO COUNTY TREASURER-TAX COLLECTOR on the interested parties in said action by placing a true copy thereof in a sealed envelope with postage thereon fully prepaid, in the United States mail at San Diego, California addressed to those parties indicated below:

David R. Hurst
McDermott Will & Emery LLP
The Nemours Building
1007 North Orange Street
4th Floor
Wilmington, DE 19801

Don A. Beskrone
Ashby & Geddes
P.O. Box 272
Wilmington, DE 19899

U.S. Bankruptcy Court
District of Delaware
824 N Market St # 500
Wilmington, DE 19801

☒ BY REGULAR MAIL: I am "readily familiar" with the firm's practice of collecting and processing correspondence for mailing. Under that practice, it would be deposited with the U.S. postal service on the same day with postage thereon fully prepaid at San Diego, California in the ordinary course of business. I am aware that on the motion of the party served, service is presumed invalid if the postal cancellation date or postage meter date is more than one day after the date of deposit for mailing in the affidavit.

☐ BY FACSIMILE TRANSMISSION: I transmitted the above-listed documents to those parties indicated on the attached service list at the fax numbers so indicated. I caused the machine to print a transmission record of the transmission, a copy of which is attached to this declaration.

I, Edward King, declare that I am employed in the office at whose direction this mailing is made. Executed on July 24, 2023, in San Diego, California.

/s/Edward King

Edward King (Senior Specialist)

DAN McALLISTER
TREASURER-TAX COLLECTOR
ATTENTION: Bankruptcy Desk
1600 Pacific Highway, Room 162
San Diego, California 92101
Telephone (619) 531-5209
Facsimile (619) 685-2589

Attachment

1. The San Diego County Treasurer-Tax Collector reserves the right to amend this request for allowance of claim based on any further assessment of property taxes or investigation/audit of property taxes associated with the named debtor(s) in this bankruptcy case.
2. The San Diego County Treasurer-Tax Collector reserves the right to amend this request for allowance of claim in accordance with any applicable federal and state law, including, but not limited to, modifying the claim as an administrative expense under 11 U.S.C. § 503, as a secured claim under 11 U.S.C. § 506, and as a priority unsecured claim under 11 U.S.C. § 507 throughout the administration of this bankruptcy case.
3. The San Diego County Treasurer-Tax Collector reserves the right to amend this claim to state its unsecured non-priority claim and its unsecured priority claim under 11 U.S.C. § 507(a)(8)(B) in the event that the value of the collateral, to which secures the San Diego County Treasurer-Tax Collector's claim, be determined to be less than the amount of the secured claim or should the San Diego County Treasurer-Tax Collector's lien be avoided in whole or in part.
4. The San Diego County Treasurer-Tax Collector reserves the right to amend this request for allowance of claim to add additional penalties and interest if legally permissible under the California Revenue & Tax Code, Bankruptcy Code, and other applicable state and federal law.
5. The San Diego County Treasurer-Tax Collector reserves the right to assess legal fees and costs incurred after this proof of claim is filed, if such fees and costs are legally permissible under applicable state and federal law.
6. This attachment shall not be deemed as a waiver of any rights or remedies which are not expressly reserved.